Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	06/10/2010	Address:	16 E. Johnson Ave.
Case #:	32F30626		West Terre Haute, IN
County:	Vigo		<u>47885</u>
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) ☐ Lithium/Ammonia Reaction(s): Residence ☐ Red Phosphorous/Iodine Reaction(s): ☐ Flammable Solvents: Residence			
Anhydrous Ammonia: Residence			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid: Residence			
Corrosive Base: Residence			
Other (item and location):			
Child under age 18 discovered (check one) ☐ Yes 3 (number present) ☐ No *If yes, fax report to Child Protective Services		Investigative Information Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other:	
This rep	ort is to be faxed to the following ag	encies that serve the	location:
Fire Depa	artment: Sugar Creek	Fax: Fax: 812-234-1010	
Health Department: Vigo Health Dept.			2-234-1802
Child Protection Service: <u>Vigo CPS</u>			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: J. Kempf/ 7922 Phone (812)299-1151			
** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department			

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.

listed within 24 hours of scene processing.